

13 April 2016  
Advertising Standards Authority  
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**Healthy Families Invercargill submission to Advertising Standards Authority on the review of the Code for Advertising to Children and the Children's Code for Advertising Food.**

The primary contact point for this submission is:

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**Thank you for the opportunity to submit on this important issue.**

Healthy Families NZ is a national initiative, and is part of the Government's wider approach to helping New Zealanders live healthy, active lives. Healthy Families Invercargill is one of 10 Healthy Families NZ Communities across New Zealand and is being led by Sport Southland.

Rates of preventable chronic diseases like type 2 diabetes, cardiovascular disease and some cancers continue to climb in New Zealand, and they're threatening our quality of life. Obesity or being overweight is a key factor driving this trend – and New Zealand is now the third most obese nation in the OECD. Since 2006 obesity in New Zealand has increased from 27 per cent, to 31 per cent. Even more worryingly, one in three New Zealand children are obese or overweight, and more than a third are inactive. The prevalence of obesity in the Southland region is higher than the national average.

Our vision is *Invercargill - a healthy, happy, safe and connected community* and part of our objective to achieve this vision is to support the Invercargill community to make good food choices. Many experts have attributed the prevalence of obesity to environmental factors. One of these factors is advertising of unhealthy foods (often referred to as high fat, salt and sugar (HFSS) or energy dense, nutrient poor (EDNP) foods).

A review of the evidence conducted by the World Health Organization found that the most common type of product that is marketed to children and young people is food (Cairns, Angus, & Hastings, 2009). The review also highlights the evidence that food promotion impacts children's nutrition knowledge, food preferences, purchasing behaviour and consumption, as well as increasing the risk of adverse health outcomes such as obesity.

Children's food choices and requests are strongly influenced by advertising. There is strong agreement of experts within the public health and medical communities in New Zealand about the restriction of unhealthy food marketing as one of the top priorities to tackle childhood obesity. Children are more vulnerable than adults when it comes to marketing for reasons such as brain development e.g. inability to critically analyse etc.

Healthy Families Invercargill believes there are opportunities in the review to strengthen both the scope and regulation of the codes to more effectively address childhood obesity rates.

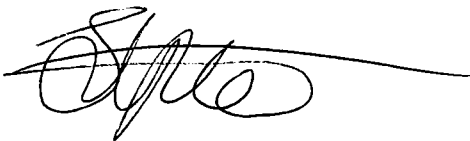
Here is our key recommendation:

- A co-regulatory approach is introduced to redevelop the codes, whereby government develops guidelines, which are then enforced by both government and industry. The current process is reactive rather than proactive in protecting children and relies on the public understanding the rules and having the time and perseverance to make a complaint. This current model does not reduce the exposure and power of advertising to children.

Other recommendations:

- The scopes of the codes need to be broadened to include all childhood settings, including children-friendly events and activities.
- The codes could be strengthened to end the unhealthy food sponsorship of children's sports teams and the use of high profile spokespeople to promote unhealthy food to children. This also includes the use of HFSS foods that are promoted using the imagery associated with popular movie, TV or book characters.
- The codes could be strengthened so that they can effectively deal with the increasingly sophisticated marketing strategies that are utilised by food manufacturers to market unhealthy foods. This includes other media such as social media, online gaming etc. Research shows e-marketing is on the rise along with sponsorship. Teens move across platforms which are interactive. We need a model that captures all marketing techniques.
- The definition of a child should be amended to include those aged up to 18 years of age and there should be standardized childhood viewing times to include when a child is typically awake.
- The Fuelled4Life Food and Beverage Classification System should be implemented as a nutrient profiling system to determine which foods should be restricted for advertising (i.e. foods that meet the sometimes and occasional foods criteria) The FBCS was designed specifically for foods and beverages children commonly consume in an education setting. Foods and beverages are classified according to their nutrient profile and the system identifies the healthier options.

**Yours Sincerely,**

A handwritten signature in black ink, appearing to read 'Jared Cappie', with a long horizontal line extending to the right.

**Jared Cappie**

**Manager - Healthy Families Invercargill**

## REFERENCES

Advertising Standards Authority New Zealand (2010). Code for Advertising of Food. Wellington: Advertising Standards Authority New Zealand.

Ministry of Health (2013). Food and Beverage Classification System. Retrieved from: <http://www.health.govt.nz/our-work/preventative-health-wellness/nutrition/food-and-beverage-classification-system>

Ministry of Health. (2016). Childhood Obesity Plan. Retrieved from <http://www.health.govt.nz/our-work/diseases-and-conditions/obesity/childhood-obesity-plan>

Lyon, J. (2013) Food and Beverage Marketing to Children. Wellington: Agencies for Nutrition Action.

Agencies for Nutrition Action Food and Beverage marketing to children:

<http://www.ana.org.nz/sites/default/files/Final%20snapshot%20of%20F%20B%20marketing.pdf>

Boyland, E. & Whalen, R. (2015). Food advertising to children and its effects on diet: a review of percent prevalence and impact data. Paediatric Diabetes, 16, 331-337.

Fuelled4life (2012). Retrieved from: <http://www.fuelled4life.org.nz/>